

# Takeout Food Invoice

Invoice #: \_\_\_\_\_  
Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Restaurant Name**

Address Line 1  
Address Line 2  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**Customer Name**

Phone: \_\_\_\_\_  
Pickup/Delivery Time: \_\_\_\_\_

Item	Qty	Unit Price	Total
_____	—	_____	_____
_____	—	_____	_____
_____	—	_____	_____

Subtotal	_____
Tax	_____
Delivery Fee	_____
<b>Total</b>	_____

Thank you for your order!